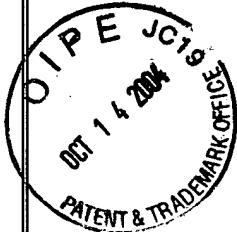


PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 071575.0775										
	In re Application of Mona B. Damaj et al.											
	Application Number 10/751,550	Filed 01/05/2004										
	For Stem-Regulated, Plant Defense	* see attached										
	Group Art Unit unassigned	Examiner unassigned										
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;"><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td style="width: 10%; text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input checked="" type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td style="text-align: right;">\$ 1,530</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td style="text-align: right;">\$ _____</td> </tr> </table> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ <u>765</u>.</p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>02-0384</u>. I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</li> <li><input checked="" type="checkbox"/> attorney or agent of record.</li> <li><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____.</li> </ul> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <p style="text-align: center;"><u>10/14/04</u> Date</p> <p style="text-align: center;">PTO Reg No.: 46,861</p> <p style="text-align: center;"> Signature</p> <p style="text-align: center;">Michelle M. LeCointe Typed or printed name</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input type="checkbox"/> Total of _____ forms are submitted.</p>			<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ _____	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ _____	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ _____	<input checked="" type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ 1,530	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ _____											
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ _____											
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ _____											
<input checked="" type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ 1,530											
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____											

**BAKER BOTTS LLP**

Attorney Docket Number: 071575.0775

Title: Stem-Regulated, Plant Defense Promoter and Uses Thereof in Tissue-Specific Expression in Monocots



Use Space Below for Additional Information: